

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 898 OF 16734

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

DCCC

Full Name (Last, First, Middle Initial)

A. ACTBLUE PAC

Mailing Address 366 SUMMER ST

City
SOMERVILLEState
MAZip Code
02144-3132FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

CONDUIT TOTAL LISTED IN AGG. FIELD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3148024.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2016

Transaction ID : VT4C3QPAWZ9E

Amount of Each Receipt this Period

15.00

☒ Memo ItemNOTE: ABOVE CONTRIBUTION EARMARKED
THROUGH THIS ORGANIZATION.

Full Name (Last, First, Middle Initial)

B. KATHI BAYNE

Mailing Address 44757 AGUILA TER

City
FREMONTState
CAZip Code
94539-6293FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

PED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

649.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2016

Transaction ID : VT4C3QPD6C4

Amount of Each Receipt this Period

50.00

☐ Memo Item* EARMARKED CONTRIBUTION: SEE BELOW
EARMARKED THROUGH ACTBLUE

Full Name (Last, First, Middle Initial)

C. ACTBLUE PAC

Mailing Address 366 SUMMER ST

City
SOMERVILLEState
MAZip Code
02144-3132FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

CONDUIT TOTAL LISTED IN AGG. FIELD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3148024.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2016

Transaction ID : VT4C3QPD6C4E

Amount of Each Receipt this Period

50.00

☒ Memo ItemNOTE: ABOVE CONTRIBUTION EARMARKED
THROUGH THIS ORGANIZATION.

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00